

P04000169792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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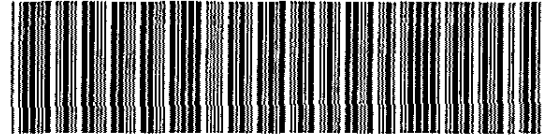
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 DEC 20 PM 1:58

12/20

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: BOAT LIFT SERVICES, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: KAREN B. SALIERS
Name (Printed or typed)
337 NE ORCHARD STREET
Address
PORT ST. LUCIE, FL 34983
City, State & Zip
305-218-5395
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BOAT LIFT SERVICES, INC. DEC 20 PM 1:58

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

337 NE ORCHARD STREET
PORT ST LUCIE, FLORIDA 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSTALLATION, MAINTENANCE
AND REPAIR OF BOAT LIFTS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

KAREN B SALIERS - PRESIDENT, TREASURER
DAVID E SALIERS - VICE PRESIDENT, SECRETARY

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

KAREN B. SALIERS
337 NE ORCHARD STREET, PORT ST LUCIE, FL 34983

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KAREN B SALIERS
337 NE ORCHARD STREET, PORT ST. LUCIE, FL 34983

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Karen B Saliers

Signature/Registered Agent

12/16/04

Date

Karen B Saliers

Signature/Incorporator

12/16/04

Date